



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION 10

1200 Sixth Avenue, Suite 900
Seattle, WA 98101-3140

LDWSF
4.4.1
10-7-11

OFFICE OF
AIR, WASTE AND TOXICS

OCT 07 2011

Mr. Gil Leon
Earle M. Jorgensen Company
10650 South Alameda
Lynwood, California 90262

Mr. Peter Jewitt
Farallon Consulting, LLC
975 5th Avenue Northwest
Issaquah, Washington 98027

Re: Action Memorandum, Responsiveness Summary and Future Actions, Jorgensen Forge Early Action Area, 8531 East Marginal Way South, Seattle, Washington, Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA) Administrative Order on Consent (EPA Docket No. CERCLA-10-2003-001)

Dear Mr. Leon and Mr. Jewitt:

The U.S. Environmental Protection Agency, Region 10 (EPA) has completed and issued the required Action Memorandum and Responsiveness Summary for Non-Time Critical Removal Action (NTCRA) for the Jorgensen Forge Early Action Area (EAA). These documents are provided as an enclosure to this letter. A copy of these documents is also posted to the EPA Region 10 Jorgensen Forge webpage.

In combination with the approval of the Engineering Evaluation/Cost Evaluation, the issuance of the Action Memo completes the requirements of the above referenced Order. A new CERCLA Administrative Order is required to implement the selected NTCRA. EPA will be forwarding a proposed Order on Consent and Statement of Work in the near future. As you aware, EPA has a number of issued Orders on Consent for EAAs within the Lower Duwamish Waterway Superfund Site. The T-117 EAA NTCRA Implementation Order issued on June 9, 2011, to the Port of Seattle and City of Seattle will provide the text for the Order, as adapted only for site specific facts and circumstances. EPA encourages you to review that Order, from which we expect no substantive changes in the "boilerplate" provisions, as we prepare the first draft of the Statement of Work.

If you have any questions, please do not hesitate to contact me at (206) 553-4166 or via email at Blocker.shawn@epa.gov, or have your counsel on your behalf contact Charles Ordine, at (206) 553-1504 or via email at Ordine.Charles@EPA.gov

Sincerely,

Shawn Blocker
Project Coordinator
RCRA Corrective Action and Permits Team

USEPA SF



1381939

Enclosure

cc: Brad Helland – Ecology NWRO
John Keeling, – Ecology NWRO
Amy Essig Desai – Farallon Consulting
Ryan Barth - Anchor Environmental
David Templeton – Anchor Environmental
James Rasmussen – DRCC
Glen St. Amant – Muckleshoot Tribe
Allison O’Sullivan – Suquamish Tribe
Jessica Winter – NOAA
John Wakeman – USACE
Lisa Cass - USACE

U.S. Postal Service™

CERTIFIED MAIL™ RECEIPT

(Does Not Provide Insurance Coverage)

Visit our website at www.usps.com®

AL USE

Mr. Gil Leon
Earle M. Jorgensen Company
10650 South Alameda
Lynwood, CA 90262

Return Receipt
(Endorsement Required)

Restricted Delivery Fee
(Endorsement Required)

Total Postage & Fees

\$

Postmark
Here

Sent To

Street, Apt. No.;
or PO Box No.

City, State, ZIP+4

7010 2780 0000 2178 8160

Certified Mail Provides:

- A mailing receipt
- A unique identifier for your mailpiece
- A record of delivery kept by the Postal Service for two years

Important Reminders:

- Certified Mail may **ONLY** be combined with First-Class Mail® or Priority Mail®
- Certified Mail is *not* available for any class of international mail.
- **NO INSURANCE COVERAGE IS PROVIDED** with Certified Mail. For valuables, please consider Insured or Registered Mail.
- For an additional fee, a *Return Receipt* may be requested to provide proof of delivery. To obtain Return Receipt service, please complete and attach a Return Receipt (PS Form 3811) to the article and add applicable postage to cover the fee. Endorse mailpiece "Return Receipt Requested". To receive a fee waiver for a duplicate return receipt, a USPS® postmark on your Certified Mail receipt is required.
- For an additional fee, delivery may be restricted to the addressee or addressee's authorized agent. Advise the clerk or mark the mailpiece with the endorsement "*Restricted Delivery*".
- If a postmark on the Certified Mail receipt is desired, please present the article at the post office for postmarking. If a postmark on the Certified Mail receipt is not needed, detach and affix label with postage and mail.

IMPORTANT: Save this receipt and present it when making an inquiry.

PS Form 3800, August 2006 (Reverse) PSN 7530-02-000-9047

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

Peter Jewitt
Farallon Consulting, LLC
975 5th Avenue Northwest
Issaquah, WA 98027

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

B. Received by (Printed Name)

Beth Roberts

☒ Agent☐ Addressee

C. Date of Delivery

10-3-11

Delivery address different from item 1? ☐ Yesor delivery address below: ☐ No☐ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7010 2780 0000 2178 8276

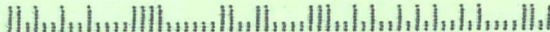
UNITED STATES POSTAL SERVICE

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

03 OCT 2011 1:49 PM

- Sender: Please print your name, address, and ZIP+4 in this box •

US Environmental Protection Agency
Office of Air, Waste & Toxics-AWT-128
1200 Sixth Avenue, Suite 900
Seattle, WA 98101



U.S. Postal Service

CERTIFIED MAIL RECEIPT

(Do Not Write on This Receipt) No Insurance Coverage Provided

Visit our website at www.usps.com

AL USE

Peter Jewitt
Farallon Consulting, LLC
975 5th Avenue Northwest
Issaquah, WA 98027

Return Receipt
(Endorsement Required)

Restricted Delivery Fee
(Endorsement Required)

Total Postage & Fees

\$

Postmark
Here

Sent To

Street, Apt. No.,
or PO Box No.

City, State, ZIP+4

7010 2780 0000 2178 8177

Certified Mail Provides:

- A mailing receipt
- A unique identifier for your mailpiece
- A record of delivery kept by the Postal Service for two years

Important Reminders:

- Certified Mail may **ONLY** be combined with First-Class Mail® or Priority Mail®.
- Certified Mail is *not* available for any class of international mail.
- **NO INSURANCE COVERAGE IS PROVIDED** with Certified Mail. For valuables, please consider Insured or Registered Mail.
- For an additional fee, a *Return Receipt* may be requested to provide proof of delivery. To obtain Return Receipt service, please complete and attach a Return Receipt (PS Form 3811) to the article and add applicable postage to cover the fee. Endorse mailpiece "Return Receipt Requested". To receive a fee waiver for a duplicate return receipt, a USPS® postmark on your Certified Mail receipt is required.
- For an additional fee, delivery may be restricted to the addressee or addressee's authorized agent. Advise the clerk or mark the mailpiece with the endorsement "*Restricted Delivery*".
- If a postmark on the Certified Mail receipt is desired, please present the article at the post office for postmarking. If a postmark on the Certified Mail receipt is not needed, detach and affix label with postage and mail.

IMPORTANT: Save this receipt and present it when making an inquiry.

PS Form 3800, August 2006 (*Reverse*) PSN 7530-02-000-9047

UNITED STATES POSTAL SERVICE

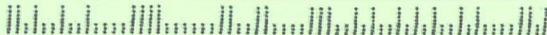
SEATTLE WA 981

11 OCT 2011 PM 2 T

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

- Sender: Please print your name, address, and ZIP+4 in this box •

US Environmental Protection Agency
Office of Air, Waste & Toxics-AWT-128
1200 Sixth Avenue, Suite 900
Seattle, WA 98101



SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

Peter Jewitt
Farallon Consulting, LLC
975 5th Avenue Northwest
Issaquah, WA 98027

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Colette Haber

☐ Agent

☐ Addressee

B. Received by (Printed Name)

Colette Haber

C. Date of Delivery

10-11-11

D. Is delivery address different from item 1?

☐ Yes

If different, enter delivery address below:

☐ No

☐ Registered

☐ Insured Mail

☐ Express Mail

☐ Return Receipt for Merchandise

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7010 2780 0000 2178 8177